400,000 students in Nevada, and to think they selected that man as the Principal of the Year is quite an honor. The principal is Michael O'Dowd. We had a longtime retired judge with whom I practiced law in the same community for a number of years, Gerry Hardcastle.

But the reason I mention this, there was a man there who introduced me to his son—a good-looking young man. His father was there to tell me about a new treatment they have developed for congenital clubfoot. In years past, the only way to handle that situation was with surgery. Now they have a new method. He had his boy there. His boy plays basketball. His boy can do anything he wants. And they have done this with no surgery. They now have new treatment for this. It is not surgical. In other countries, people spend the rest of their lives with their feet upside down unless there is surgery. and it is so difficult to do. So that is why health care is important.

This is one minor example of how we are advancing in health care, and we have to make sure health care is affordable to the American people. Our health care costs are more than $2\frac{1}{2}$ times that of Japan. Yet the health care is not as good here as in Japan.

I look forward to sending that bill on to the Congressional Budget Office. I had spoken to the Republican leader yesterday. We are going to make sure Senators have plenty of opportunity to look at this bill once we get it back. We are concerned about quality, not quantity-well, we are interested in quality, not how fast we can move this. We want to move it as quickly as we can, as expeditiously as we can, but we want to do it as well as we can. So I look forward to working with the Republican leader to have a good debate on this matter and have health care for all Americans.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, there will now be a period of morning business for 1 hour, with Senators permitted to speak therein for up to 10 minutes each, with the time equally divided and controlled between the two leaders or their designees, with the majority controlling the first half and the Republicans controlling the final half.

Mr. REID. Mr. President, I suggest the absence of a quorum and ask unanimous consent that our time for morning business not start until the quorum is called off.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. BROWN. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The ACTING PRESIDENT pro tempore. Without objection, it is so ordered.

HEALTH CARE REFORM

Mr. BROWN. Mr. President, I appreciate sharing the floor with the senior Senator from Minnesota, Ms. KLOBUCHAR.

I come to the floor regularly and share letters from voters and constituents and citizens around my State, around Ohio, people from Kent and Warren and Mansfield and Zanesville and Chillicothe. We all get these letters. I know the Acting President pro tempore gets them from Arkansas and Senator Klobuchar gets them from Minnesota—letters from people who generally, 2 years ago, a year ago, if you asked them, they would have said they were satisfied with their insurance, but then something happened: They had a child born with an illness and the insurance company cut them off because the child had a preexisting condition or someone got very sick. they thought they had good insurance, but the insurance company canceled them because the cost was so high for their illness. A lot of these letters also come from people who lost their job. They are 59, 60, 61 years old, and they pray to God they will be able to get through the next 3, 4, 5 years until they are Medicare eligible so they will have a strong government health care plan— Medicare—to insure them the rest of their lives, so they can get the kind of health care they, as American citizens, should be entitled to.

So let me share three or four letters, and then I will turn the floor over to Senator Klobuchar.

Allison from Hamilton County, in southwest Ohio, the Cincinnati area, writes:

In June, I was taken to the hospital for suspected Ruptured appendix. I was admitted and stayed for 24 hours. Currently, my hospital expenses are at \$9000. Each day it seems like another bill comes to my home.

Last year, I had a part time job while going to school full-time and earned \$7000. I completed my coursework and began looking for full time work last month in this tough economy.

I believe that the health care program being discussed will help families like mine.

Allison is exactly right. Think about this. This woman was in college. She was working. She is doing everything we ask in this country. She was in college full time. She was working a parttime job. She was working hard. She lost her insurance. She does not have insurance because of her age. So what is going to happen to her? She is going to face a workplace that is not very embracing right now, with not a lot of opportunity, and have these kinds of costs already piling up—possibly student loans also.

What our bill will do is simply say that anybody can stay in their parent's

health plan up to the age of 26. That will make a difference for people such as Allison.

Greg from Shelby County, in western Ohio, the Sidney area of the State, writes:

Please keep up the fight for healthcare reform. We have a 23-year-old daughter who just graduated from college and has been consistently denied health insurance because of a pre-existing condition.

Her condition only requires maintenance medication but she is evidently considered "too much of a risk" to insure.

We know that if opponents of health reform had a loved one being denied health insurance they [might] not be so against it.

Please, please keep fighting and make sure to adopt legislation to get coverage for all Americans.

Greg and his daughter are victims again of a system that is malfunctioning. Too many times, in too many cases, people who thought they had decent insurance—their daughter is 23. She cannot stay on her parent's plan because of that. Our bill will allow her to. Our bill will give his daughter the opportunity to go into the insurance exchange—to pick Aetna or Blue Cross or WellPoint or another insurance company or pick a public option—a public option—that will keep the insurance companies honest, that will compete with the insurance companies and help bring costs down.

There are two more letters. I have a letter from Stephanie from Cincinnati. I will tell her story quickly.

Stephanie traveled all the way from Ohio, along with six other families from around the country, to talk about their health care stories. They are speaking for millions of Americans who can't obtain health insurance or who have coverage but still can't get needed medical services. Stephanie's parents were in an accident that cost her mother her life and left her father in intensive care for 5 weeks. Stephanie had to battle insurance companies constantly to get her father vital treatments for his injuries so he could walk again.

Stephanie's message is simple. She said: I and every other American are not simply claims to be denied.

Think about that. Your mother is killed in a car accident. Your father is in intensive care. What are you doing? You are fighting with insurance companies to cover your father's medical care. What kind of system does that?

Insurance companies don't want to insure you when you are sick. If you are going to be too expensive, they find reasons to deny you care: preexisting condition, discrimination based on disability or gender or age or geography. They don't want to cover you if you are sick, but if you get insurance, then they work to try to deny your claim.

Thirty percent of claims in this country are denied in the first round—30 percent. Some of them get undenied. Some of them get accepted and paid. But the sick person or the sick person's family has to get on the phone day after day and fight with the insurance

company and cajole and argue and call their State legislator and call their Congressman and push the insurance company to do the right thing. What does that do? If you are suffering from breast cancer and you have to deal with your illness and all those issues and you have to deal with an insurance company, what kind of health care system is that?

The last letter I will read, and then turn the floor over to Senator KLOBUCHAR, is from Dan from Butler County, just north of Cincinnati. Dan writes:

I am 47 years old. My wife and I are among the working poor in this country. We live in a very modest home with typical household expenses: A car, a school loan, a few thousand dollars of credit, and other bills. But starting in 2010, our health care expenses will nearly equal our monthly mortgage payments.

I have been diabetic since age 4. Twenty years ago I got a kidney transplant. But today, I can't pay for the increased health premiums my insurance company charges me. I can't pay the doctor bills and keep my house and my car at the same time. It will eventually come down to not seeing a doctor or not taking my medication in order to keep my house.

Had I known before that getting a kidney transplant in 1988 would be a preexisting condition today, I would have declined it and not put the financial burden on my parents, myself, and my wife.

So here is a gentleman in Middletown, Hamilton, in that area of Ohio. Dan works every day, working poor, making \$10, \$12 an hour, barely making it, working hard every day. He has to make a choice: house payment, medication, insurance payment. He can't do all three. Maybe he can't even do two of those. When somebody is working that hard and playing by the rules and doing what we ask of them in this country, which is to work hard, raise your kids, go to school, contribute to your community, Dan doesn't have that opportunity because of what has happened to health care costs.

Our bill will help people such as Dan. If he doesn't have insurance or he can't afford that insurance, he can go into an insurance exchange, choose a menu of plans: CIGNA or Aetna or WellPoint or he can choose the public option, which will mean no more preexisting condition, no more denial of care, no more limits if you get sick and it gets expensive. It will keep the insurance companies honest, allow them to compete, and bring the prices down. That is why the public option will make this health care bill even better than it would be otherwise. It is the least we can do. It is what we have to do for our Nation.

I vield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Minnesota.

Ms. KLOBUCHAR. Mr. President, I think the Republican leader is here and he will go before me.

RECOGNITION OF THE MINORITY LEADER

The ACTING PRESIDENT pro tempore. The Republican leader is recognized.

Mr. McCONNELL. Mr. President, I thank my friend from Minnesota for giving me an opportunity to make my opening remarks. I appreciate it very much.

TRIBUTE TO DAN INOUYE

Mr. McCONNELL. Mr. President, it is a pleasure for me to call attention to someone who rarely calls attention to himself. Today, our friend, Senator INOUYE, reaches a very lofty milestone, and we honor him for his achievement. It is an opportunity to call attention not only to his dedication to the people of Hawaii but also to a remarkable American story.

Senator Inouye was only 17 when he heard the sirens over Honolulu and saw the gray planes flying overhead, but he was old enough to know nothing would be the same. At the time, he dreamed of being a surgeon. A few years later, a medic would be taking care of him after his heroic actions in the Italian mountains, for which he would later receive our Nation's most prestigious award for military valor.

DAN INOUYE'S dream of being a surgeon was not realized. There were other things in store. Instead, he became a member of one of the most decorated U.S. military units in American history and one of our Nation's longest serving and finest Senators.

We are periodically reminded of Senator INOUYE's deep commitment to service, such as earlier this month when he traveled to Afghanistan and Pakistan to check in on our troops and ensure their well-being. It was an arduous journey for anyone, let alone a Senator who has served so long.

Senator, thank you for your service and for your example and congratulations on your achievement.

MEDICARE CUTS

Mr. McCONNELL. Mr. President, at the moment, the final details of the Democratic health care plan are largely unknown to the American people. That is because those details are being worked out in private by a handful of senior Democrats and White House officials, but we do know the basics.

The Democratic bill will be about 1,500 pages long, it will cost \$1 trillion, it will raise insurance premiums and taxes, and it will slash Medicare for seniors by about \$\frac{1}{2}\$ trillion over the next 10 years. This much we know.

We also know where some of these cuts will be made. More than \$120 billion in Medicare cuts for hospitals that care for seniors; more than \$130 billion in cuts to Medicare Advantage, a program for seniors; more than \$40 billion in cuts to home health agencies; and nearly \$8 billion in cuts to hospice care. These are major cuts with serious consequences.

Just yesterday I heard about some of these consequences when I met with a group that represents hospices across Kentucky, including Phillip Marshall,

from my hometown of Louisville, who explained the situation. He told me these vital facilities depend on Medicare for most of their costs and that they make up most of the rest through charitable giving and through the generosity of many dedicated volunteers. He also told me he has been following the debate in Congress, and he is concerned the proposed cuts he is hearing about would have a serious effect on hospice care. He is not alone.

Last month, I received a letter from Brandy Cantor with the Kentucky Association of Hospice and Palliative Care. She told me about the tremendous emotional and spiritual support hospice care workers provide each year to thousands of Kentuckians at the end of their lives, and she also told me that the cuts to these programs would have a devastating effect on the good work these facilities do.

I got another letter last month from a Kentucky nurse named Victoria Scarborough. She started out by telling me she supports health care reform, as we all do, and she wrote, with evident pride, about the excellent care the caring people who work in her facility are able to provide. To prove it, she related some of the comments she has received from patients. One hospice patient wrote that she didn't know what she would have done without hospice. Another said she had been treated "with the utmost care, love, and concern."

This is the kind of care everyone deserves and which we all hope our loved ones would receive during a serious illness. But according to Ms. Scarborough, the hospice cuts currently being proposed would have a serious adverse effect on care.

I know the bill writers support the compassionate work that is provided by hospice care across the country. By mentioning these letters, I don't mean to imply otherwise. But I do believe we need to be aware of how these cuts will affect real people, and these are just the cuts to hospice care, which represent only a fraction of the cuts that are being proposed.

Some of my colleagues will speak today about the dangers of these Medicare cuts. They will also talk, as I have many times, about the wrongheadedness of using Medicare as a piggy bank to fund a further expansion of government health care. We need to strengthen Medicare and preserve it for today's seniors and future generations, not slash it to create more programs that are bound to have the same fiscal problems Medicare, Medicaid, and Social Security already have.

I understand the problem of the bill writers. It is not easy to raise \$1 trillion, particularly at a time when Americans are clamoring for a reduction of our record deficits and ballooning debt, but slashing Medicare is not the way to go.

Republicans have suggested another way, and that is commonsense, step-